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How Officials Keep Cooking the Books on COVID Casualties

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STORY AT-A-GLANCE -

- COVID-19 deaths may have been overreported, in some cases by as much as 500%, according to a Full Measure investigation
- In Colorado, homicide-suicide deaths were counted as COVID-19 casualties because they were listed in a database of people who had tested positive for COVID-19 within 28 days of their death
- Someone who died "with" COVID-19 may be counted as a death among COVID-19 cases, even if the virus had nothing to do with their death
- In Alameda County, California, when they removed deaths that weren't directly caused by COVID-19 from their official count, the number of "COVID" deaths dropped by 25%
- May 1, 2021, the CDC stopped monitoring most COVID-19 infections among vaccinated people
- The end result is that there's no way to know how many people have been infected, including among the vaccinated, and how the virus is spreading; it's possible the CDC stopped tracking most COVID-19 cases among the vaccinated in order to obscure just how commonly the vaccines are failing

How many people have died of COVID-19? The media is reporting CDC data that the death toll is about 640,000 in the U.S., but the answer is nobody knows. Health officials like Dr. Anthony Fauci claim that there are likely far more COVID-19 deaths than have been reported, meaning that such deaths are being undercounted.[1]

Evidence of this, however, is lacking and many believe the opposite is true — that COVID-19 deaths have been overreported, in some cases by as much as 500%. In a Full Measure investigation, host and investigative journalist Sharyl Attkisson revealed their findings from around the U.S., which found that "in some documented cases, news that COVID was the cause of death was greatly exaggerated."[2]

Meanwhile, the U.S. Centers for Disease Control and Prevention has made startling changes in how they track COVID-19 cases, which is muddling the data and making it virtually impossible to track infections among those who have received a COVID-19 injection.[3]

Homicide, Suicide Counted as COVID Deaths

Grand County, Colorado, has a population of just 15,717 people.[4] It's the type of rural area where coroner Brenda Bock is able to keep tabs on each and every death, including those from COVID-19 — of which, she said, there were none in 2020.[5] COVID-19 deaths, however, were recorded in the area, highlighting the problems with how such casualties are counted. Bock told Attkisson:[6]

> *"I had a homicide-suicide the end of November, and the very next day it showed up on the state website as Covid deaths. And they were gunshot wounds. And I questioned that immediately because I had not even signed off the death certificates yet, and the state was already reporting them as Covid deaths."*

The reasoning behind counting the homicide-suicide deaths as COVID-19 casualties was that they were listed in a database of people who had tested positive for COVID-19 within 28 days of their death. According to Full Measure:[7]

> *"Because there had been no Covid deaths within the geographic boundaries of Grand County in 2020, Bock was in a unique position to challenge the state's accounting. In many cities and counties, the numbers are too big and the coroners would never know about discrepancies."*

There were other instances in Grand County as well. Bock investigated two "COVID-19 deaths," which turned out to be people who were still alive. "They just got put in there by accident," Bock said.[8] Attkisson also spoke with Dr. James Caruso, chief medical examiner and coroner for Denver, who said he had also heard from coroners in rural counties that trauma deaths were being counted as COVID-19 casualties:[9]

> *"[A]t some level — maybe the state level, maybe the federal level — there's a possibility that they were cross-referencing Covid tests. And that people who tested positive for Covid were listed as a Covid-related death, regardless of their true cause of death. And I believe that's very erroneous, and not the way the statistics needed to be accumulated."*

Dying 'of' COVID or 'With' COVID

The distinction comes down to some tricky working: deaths "among" COVID-19 cases and deaths "due to" COVID-19, or dying "of" COVID or "with" COVID. Someone who died with COVID-19 may be counted as a death among COVID-19 cases, even if the virus had nothing to do with their death.

When a death is said to be "due to" COVID-19, this is intended when COVID-19 caused or significantly contributed to the death. According to the Colorado Department of

Public Health and Environment:[10]

> *"The number of deaths due to COVID-19 are not necessarily included in the number of deaths among people with COVID-19. After review, at either the state or national level, some deaths may not be counted as COVID-19 deaths. This is rare, and the expectation is that in the end the numbers will closely align."*

But according to Bock, the inflated numbers could hurt the region's economy, which is largely dependent on tourism:[11]

> *"It's absurd that they would even put that on there. Would you want to go to a county that has really high death numbers? Would you want to go visit that county because they are contagious? You know I might get it, and I could die if all of a sudden one county has a high death count. We don't have it, and we don't need those numbers inflated."*

Caruso told Attkisson that he voiced his concerns about deaths being wrongly attributed to COVID-19 to the Colorado Department of Public Health in April 2020. A coroner from Montezuma County also complained after an alcohol death was deemed a COVID death. Colorado ended up adding categories to their death counts, stating a person died "Of" COVID or "With" COVID, but the counts were still off.

For instance, Bock's murder-suicide cases were still being counted under "With COVID," even though they shouldn't have been tallied at all. According to Bock:[12]

> *"And that's what I complained about. And then when I did talk to the Governor, he told me he didn't believe it was right, but he wasn't going to have them remove it from the count because all the other states were doing it that way so we were going to also."*

Full Measure's investigation found that of the 13,845 COVID-related deaths in Colorado, about half were among people who died "among" or "with" COVID. The media is also contributing to the confusion. In one instance The New York Times inflated the number of people who died from COVID-19 in Grand County by at least 500%.[13]

This raises questions about COVID deaths being reported nationwide. There have been reports, for instance, of traffic accident fatalities,[14] cancer[15] and nursing home or hospice deaths[16] being attributed to COVID-19. And in Alameda County, California, when they removed deaths that's weren't directly caused by COVID-19 from their official count, the number of "COVID" deaths dropped by 25%.[17] Attkisson said:[18]

> *"The obvious implications are huge. If such a significant number of Colorado's "Covid deaths" weren't directly caused by Covid, or even related at all in some cases, and if that bears out in other states, it means the national totals we've heard since the start of the pandemic could be largely misleading."*

CDC Isn't Tracking Most Cases Among the Vaccinated

Media reports keep referring to the pandemic as a crisis of the unvaccinated, which is simply inaccurate, since COVID-19 continues to affect and spread among those who have been vaccinated. The CDC's Morbidity and Mortality Weekly Report (MMWR) posted online July 30, 2021, details an outbreak of COVID-19 that occurred in Barnstable County, Massachusetts — 74% of the cases occurred in fully vaccinated people.[19]

So-called "breakthrough infections," which used to be known as vaccine failures, were reported by the CDC far earlier, though, including in their May 28 MMWR, which

documented 10,262 breakthrough infections reported January 1, 2021, to April 23, 2021, across 46 states.[20]

This, they believed, was "likely a substantial undercount," but rather than continuing to assess the situation, they stopped monitoring most COVID-19 infections among vaccinated people:[21]

> *"Beginning May 1, 2021, CDC transitioned from monitoring all reported COVID-19 vaccine breakthrough infections to investigating only those among patients who are hospitalized or die, thereby focusing on the cases of highest clinical and public health significance."*

ProPublica detailed the case of Meggan Ingram, a 37-year-old who is fully vaccinated but tested positive for COVID-19. She became sick enough to require oxygen and intravenous steroids in a hospital for three hours, but wasn't admitted. Her case won't be counted among the official count, and neither will the seven other people in her household who also tested positive — five of them fully vaccinated.[22]

The end result is that there's no way to know how many people have been infected, including among the vaccinated, and how the virus is spreading. As Dr. Randall Olsen, medical director of molecular diagnostics at Houston Methodist Hospital in Texas, told ProPublica, "They are missing a large portion of the infected. If you're limiting yourself to a small subpopulation with only hospitalizations and deaths, you risk a biased viewpoint."[23]

Injection Effectiveness Is Dropping

It's possible the CDC stopped tracking most COVID-19 cases among the vaccinated in order to obscure just how commonly the vaccines are failing. According to CDC data, the overall COVID-19 vaccine effectiveness declined from 91.8% in May to 75% in

July.[24] Among nursing home residents, the vaccines are similarly failing, dropping from an effectiveness rate of 74.7% in March-May 2021 to 53.1% in June-July.[25]

"The vaccinated are not as protected as they think. They are still in jeopardy," Dr. Eric Topol, director of the Scripps Research Translational Institute, told ProPublica.[26] As for why the CDC abruptly stopped tracking most breakthrough cases, the agency said it was because the more targeted data collection would be more useful for "response research, decisions, and policy."[27]

However, it's resulted in a lack of consistency and access to the full data for the U.S. public, with each state varying in what data it's gathering and whether or not to share it. U.S. Sen. Edward Markey, D-Mass., has called on the CDC to track and share information on COVID-19 breakthrough cases. In a letter to CDC director Dr. Rochelle Walensky, he said:[28]

> *"The American public must be informed of the continued risks posed by COVID-19 and variants, and public health and medical officials, as well as health care providers, must have robust data and information to guide their decisions on public health measures."*

In July 2021, he asked to CDC to respond to a series of questions, including whether vaccine-derived immunity is decreasing in light of the breakthrough cases and what action they're taking to monitor breakthrough cases among people who aren't hospitalized. As of September 2021, he had still received no response, and many remain puzzled over the CDC's sudden refusal to track such crucial health data.[29]

"I was shocked," Dr. Leana Wen, a physician and visiting professor of health policy and management at George Washington University, told ProPublica. "I have yet to hear a coherent explanation of why they stopped tracking this information."[30]